

SECRET

Approved For Release 2006/11/13 : CIA-RDP75-00399R000100110021-2

<b>REPORTS INVENTORY</b>						CONTROL NO. DDS/OF-090	
PREPARE IN DUPLICATE							
1. TITLE OF REPORT (If a fill-in report include Form No.)  Notice of Delinquent Accountings						2. TYPE OF REPORT  <input checked="" type="checkbox"/> NARRATIVE <input type="checkbox"/> STATISTICAL <input type="checkbox"/> MACHINE-NAME LISTING	
3. FUNCTIONAL AREA		PERSONNEL		TRAINING		ADMIN. GENERAL OTHER (specify)	
		LOGISTICS		SECURITY			
		MEDICAL		<input checked="" type="checkbox"/> FINANCE			
4. NO. OF COPIES PREPARED  2		5. FREQUENCY (weekly, monthly, quarterly, etc.)  Monthly, as required				6. DISTRIBUTION (No. of components not number of copies)  1	
7. FORMAT (memorandum, form computer print-out, etc)  Memorandum		8. ADP PROCESSING				9. DIRECTIVE AUTHORITY REQUIRING REPORT  Administrative Plans	
		IF YES GIVE ADP PROCESSING NO.					
10. PREPARING COMPONENT (include lowest level contributing information to report)  PSAD		11. FEEDER REPORTS (State total number and identify by Title, Form No., or nomenclature. Attach separate sheet if necessary.)					
<b>12. COST FACTORS</b>							
<b>A. MANUAL PREPARATION AND REVIEW COSTS</b>							
GRADE	HOURLY RATE	<input checked="" type="checkbox"/> HOURS PER REPORT	=	COST PER REPORT	<input checked="" type="checkbox"/> TIMES PREPARED	=	COST PER YEAR
GS-14	\$ 10.70	1/6		\$ 1.78	20		\$ 98.40
GS-05	3.57	1/4		.89	20		
GS-15	12.47	1/10		1.25	20		
				\$ 4.92			
<b>B. COSTS OF COMPUTER PRODUCED REPORTS</b>							
TOTAL COSTS PER YEAR						\$ 98.40	
13. COMPLETE DETAILED JUSTIFICATION FOR THIS REPORT (in addition to directive or authority cited in item 9). IF KNOWN, INCLUDE DATE REPORT WAS FIRST STARTED AND COMPONENT WHO ESTABLISHED REQUIREMENT.  This follow-up is required to provide current reporting and processing of the financial statements. Date report first initiated -- 1965 by SSA/DDS.							
<b>14. FUTURE GOALS</b>							
GOAL PROPOSED BY COMPONENT FOR THIS REPORT <input checked="" type="checkbox"/> RETAIN AS IS <input type="checkbox"/> OTHER (explain)  <input type="checkbox"/> CHANGE  <input type="checkbox"/> DISCONTINUE						ESTIMATED SAVINGS	
						MAN-HOURS	DOLLARS
16. DATE OF INVENTORY		17. NAME AND TITLE OF PERSON FURNISHING INFORMATION Approved For Release 2006/11/13 : CIA-RDP75-00399R000100110021-2					18. EXTENSION